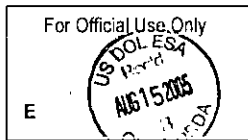


# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



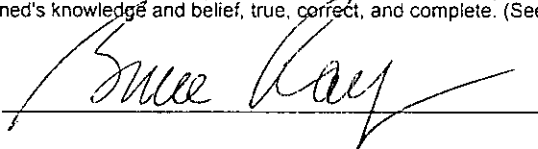
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number <b>U - 01955</b>	2. Fiscal Year Covered From:  1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing.  Name <b>Bruce Raynor</b>  P.O. Box, Bldg., Room No., if any  Street <b>275 Seventh Avenue</b>  City <b>New York</b>  State <b>New York</b> ZIP Code + 4 <b>10001</b>	4. Name, file number, and address of labor organization.  Name <b>UNITE HERE</b>  Labor Organization File Number <b>000-511</b>  P.O. Box, Building and Room Number, if any  Street <b>275 Seventh Avenue</b>  City <b>New York</b>  State <b>New York</b> ZIP Code + 4 <b>10001</b>
5. Position in labor organization. <b>General President</b>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any).  Name <b>See attachment A</b>  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income.  <b>See attachment A</b>  7.b. Amount.

### Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed 	On <b>8-11-05</b> Date	<b>212-265-7000</b> Telephone Number

Name of Person Filing <b>Bruce Raynor</b>	File Number U- <b>01955</b>
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**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <b>Amalgamated Bank of New York</b></p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street <b>15 Union Square</b></p> <p>City <b>New York</b></p> <p>State <b>New York</b> ZIP Code + 4 <b>10003</b></p>	<p><b>9. Business deals with:</b></p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>															
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>11.a. Nature of such dealing.</b></p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Cost</th> <th style="text-align: left;">No. of shares</th> <th style="text-align: left;">Price per share</th> </tr> </thead> <tbody> <tr> <td>\$1,586.70</td> <td>10</td> <td>\$158.67</td> </tr> <tr> <td>\$3,582.00</td> <td>18</td> <td>\$199.00</td> </tr> <tr> <td>\$4,818.00</td> <td>22</td> <td>\$219.00</td> </tr> <tr> <td>\$9,986.70</td> <td>50</td> <td></td> </tr> </tbody> </table> <p><b>Bank Chairman</b></p>	Cost	No. of shares	Price per share	\$1,586.70	10	\$158.67	\$3,582.00	18	\$199.00	\$4,818.00	22	\$219.00	\$9,986.70	50	
Cost	No. of shares	Price per share														
\$1,586.70	10	\$158.67														
\$3,582.00	18	\$199.00														
\$4,818.00	22	\$219.00														
\$9,986.70	50															
	<p><b>11.b. Approximate dollar value of such dealing.</b> <span style="float: right;"><b>\$15,728</b></span></p>															
	<p><b>12.a. Nature of interest held or income received.</b></p> <p>See attachment B</p>															
	<p><b>12.b. Amount.</b> <span style="float: right;"><b>\$103,391</b></span></p>															

<p><b>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</b></p>	
<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p><b>14.a. Nature of payment.</b></p>
<p><b>13.b. Is the Business an Employer or Consultant ?</b></p>	<p><b>14.b. Amount of payment.</b></p>

Name of Person Filing **Bruce Raynor**

File Number U- 01955

**Part B Continuation Page**

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

**8. Name and address of Business (including trade name, if any).**

Name UNITE HERE Workers Pension Fund

Trade Name, if any: \_\_\_\_\_

P.O. Box, Bldg., Room No., if any Suite 302

Street 6 Blackstone Valley Place

City Lincoln

State Rhode Island

ZIP Code + 4 02865

**9. Business deals with:**

☒ a. Labor Organization

b. Trust

c. Employer

**10. If 9.b. or 9.c. is checked give trust or employer's name.**

Name \_\_\_\_\_

Trade Name, if any: \_\_\_\_\_

P.O. Box, Bldg., Room No., if any \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code + 4 \_\_\_\_\_

**11.a. Nature of such dealing.**

Trustee of the fund

**11.b. Approximate dollar value of such dealing.**

**12.a. Nature of interest held or income received.**

Three meals and one hotel expense related to Trustee meetings.

**12 b. Amount.**

**\$480**

Name of Person Filing Bruce Raynor

File Number U- 01955

**Part B Continuation Page**

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

**8. Name and address of Business (including trade name, if any).**

Name Lerach Coughlin Stoia Geller Rudman & Robbin

Trade Name, if any: \_\_\_\_\_

P.O. Box, Bldg., Room No., if any Suite 510

Street 9601 Wilshire Boulevard

City Los Angeles

State California ZIP Code + 4 90210

**9. Business deals with:**

☒ a. Labor Organization

b. Trust

c. Employer

**10. If 9.b. or 9.c. is checked give trust or employer's name.**

Name \_\_\_\_\_

Trade Name, if any: \_\_\_\_\_

P.O. Box, Bldg., Room No., if any \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ ZIP Code + 4 \_\_\_\_\_

**11.a. Nature of such dealing.**

The Union is a client of this law firm.

**11.b. Approximate dollar value of such dealing.**

**12.a. Nature of interest held or income received.**

Drinks

**12.b. Amount.**

**\$40**

Name of Person Filing **Bruce Raynor**

File Number U- 01955

**Part B Continuation Page**

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

**8. Name and address of Business (including trade name, if any).**

Name **Union Plus**

Trade Name, if any:

P.O. Box, Bldg., Room No., if any **Suite 300**

Street **1125 15th Street, NW**

City **Washington**

State **District of Columbia** ZIP Code + 4 **20005**

**9. Business deals with:**

☒ a. Labor Organization

b. Trust

c. Employer

**10. If 9.b. or 9.c. is checked give trust or employer's name.**

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

**11.a. Nature of such dealing.**

**Member**

**11.b. Approximate dollar value of such dealing.**

**12.a. Nature of interest held or income received.**

**Meal**

**12.b. Amount.**

**\$56**

Name of Person Filing **Bruce Raynor**

File Number U- 01955

**Part B Continuation Page**

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

**8. Name and address of Business (including trade name, if any).**

Name **Shulte, Roth & Zable**

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street **919 Third Avenue**

City **New York**

State **New York** ZIP Code + 4 **10022**

**9. Business deals with:**

☒ a. Labor Organization

b. Trust

c. Employer

**10. If 9.b. or 9.c. is checked give trust or employer's name.**

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

**11.a. Nature of such dealing.**

UNITE HERE is a client of this law firm

**11.b. Approximate dollar value of such dealing.**

**12.a. Nature of interest held or income received.**

Meal

**12.b. Amount.**

\$173

**Answer to question 7.a Nature of Interest, Transaction or Income**

In 2004, the nature of my position as President of UNITE and then General President of UNITE HERE (after July 2004 merger) necessitated that on occasion I had lunch or dinner with a representative of an employer with whom UNITE HERE has a collective bargaining relationship. My current practice is to either a) split the cost of such meals; b) pick up the entire tab (and seek reimbursement from the Union); or c) alternate paying with the employer representative. I believe that I followed one of those practices in most instances in 2004.

**Attachment B**

Bruce Raynor

Part B

Amalgamated Bank of New York

Answer to question 12.a Nature of interest held or income received

<b>Description</b>	<b>Amount</b>
Dividends	\$1,179.00
Fees	\$31,000.00
Board of Directors lunches	\$402.50
Gifts (Bank gifts received on behalf of UNITE HERE and distributed to UNITE HERE staffers.)	\$1,800.00
Sports and Theatre tickets (Almost all of these were given to officers & staff of UNITE HERE and other unions.)	\$16,743.50
Transportation	\$51,555.80
Other meals	\$710.62